

DTG Rec'd PCT/PTO 06 JUL 2004

Attorney Docket No. 56792-PCT (71699)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: JOHNS HOPKINS UNIVERISTY  
INVENTOR: Daniel W. CHAN, et al.  
INT. APPLN. NO.: PCT/US03/00531  
FILED: 07 January 2003  
FOR: BIOMARKERS FOR DETECTING OVARIAN CANCER


BOX PCT  
THE HONORABLE COMMISSIONER OF PATENTS AND TRADEMARKS  
WASHINGTON, DC 20231

Attn: RO/US  
Authorized Officer: Kareem Duncan

\*\*\*\*\*

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 (Express Mail Label No. EL932685774US), and is addressed to the Commissioner for Patents, Washington, D.C. 20231 on April 11, 2003.

  
Beth-Ann Marino

\*\*\*\*\*

SIR:

RESPONSE TO INVITATION TO CORRECT  
DEFECTS IN THE INTERNATIONAL APPLICATION

An Invitation to Correct Defects was mailed on February 13, 2003, for the above-referenced international application. A request for a one month extension of time was requested on March 13, 2003, (a copy of which was enclosed.) -

In response to the Invitation, enclosed please find:

- (1) A copy of the Invitation to Correct Defects in the International Application mailed February 13, 2003.

10/500838

DT04 Rec'd PCT/PTO 06 JUL 2004

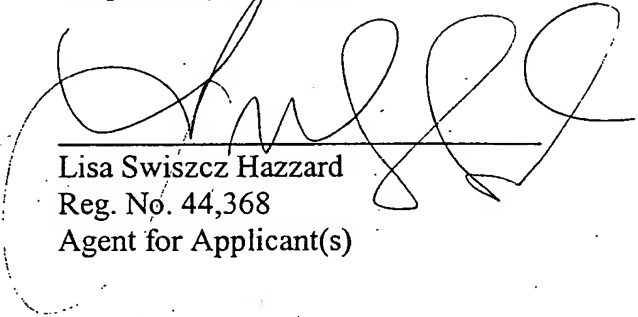
- (2) A copy the request for Extension of Time to respond to the Invitation to Correct Defects in the International Application.
- (3) A General Power of Attorney signed by the Johns Hopkins University as indicated in Annex A (1d) pursuant to Rules 4.15 and 90.4.

Although it is believed that no additional extension fee(s) are necessary to consider this submission, the PCT is hereby authorized to charge our Deposit Account No. 04-1105 should any fee be necessary.

Please contact the undersigned attorney if any additional information is needed.

Respectfully submitted,

Date: April 11, 2003



Lisa Swiszczy Hazzard  
Reg. No. 44,368  
Agent for Applicant(s)

Intellectual Property Practice Group  
EDWARDS & ANGELL, LLP  
P.O. Box 9169  
Boston, MA 02209  
Tele: (617) 439-4444  
Customer No. 21,874

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RECEIVED  
FEB 20 2003  
EDWARDS & ANGELL LLP  
DIKE BRONSTEIN  
ROBERTS CUSHMAN

W0  
(1699)

# PATENT COOPERATION TREATY

From the RECEIVING OFFICE

PCT

## INVITATION TO CORRECT DEFECTS IN THE INTERNATIONAL APPLICATION

(PCT Articles 3(4)(i) and 14(1) and Rule 26)

To: PETER F. CORLESS EDWARDS & ANGELL, LLP P. O. BOX 9169 BOSTON, MASSACHUSETTS 02209		Date of mailing (day/month/year) 13 Feb 2003
Applicant's or agent's file reference 56792-PCT	REPLY DUE within 1 months / days from the above date of mailing	
International application No. PCT/US03/00531	International filing date (day/month/year) 07 Jan 2003	
Applicant JOHNS HOPKINS UNIVERSITY		

1. The applicant is hereby invited, within the time limit indicated above, to correct the defects in the international application as filed, the defects specified on the attached

- ☒ Annex A  
☐ Annex B1 (text matter of the international application as filed)  
☐ Annex C1 (drawings of the international application as filed)

2. The applicant is hereby invited, within the time limit indicated above, to correct the defects in the translation of the international application furnished under Rule 12.3, the defects specified on the attached

- ☐ Annex A  
☐ Annex B2 (text matter of the translation of the international application)  
☐ Annex C2 (drawings of the translation of the international application)

Additional observations (if necessary):

Edwards & Angell LLP  
Dike, Bronstein, Roberts & Cushman  
101 Federal St. Boston, MA 02110  
Date Rec'd 2/13/03  
Docketed For 2/13/03  
By RMC  
Approved

### HOW TO CORRECT THE DEFECTS?

Correction must be submitted by filing a replacement sheet embodying the correction and a letter accompanying the replacement sheet, which shall draw attention to the difference between the replaced sheet and the replacement sheet. A correction may be stated in a letter only if it is of such a nature that it can be transferred from the letter to the record copy without adversely affecting the clarity and direct reproducibility of the sheet onto which the correction is to be transferred (Rule 26.4(a)).

### ATTENTION

Failure to correct the defects will result in the international application being considered withdrawn by this receiving Office (see Rule 26.5 for further details).

A copy of this invitation and any attachments has been sent to the International Bureau

☒ and the International Searching Authority.

Name and mailing address of the receiving Office Assistant Commissioner for Patent, Box PCT Washington, D.C. 20231 Attn:RO/US	Authorized officer Kareem Duncan	Kareem Duncan Paralegal Specialist PCT OPERATIONS TEAM 1 703/305-3230
Facsimile No. 703-305-3230	Telephone No.	703/305-3230

Form PCT/RO/106 (July 1998)

# ANNEX A TO FORM PCT/RO/106

International application No.  
PCT/US03/00531

The receiving Office has found the following defects in the international application as filed:

1. As to **signature\*** of the international application (Rules 4.15 and 90.4), the request:
  - a. ☐ is not signed.
  - b. ☐ is not signed by all applicants.
  - c. ☐ is not accompanied by the statement referred to in the check list in Box No. VIII of the request explaining the lack of the signature of an applicant for the designation of the United States of America.
  - d. ☒ is signed by what appears to be an agent/common representative but
    - ☒ the international application is not accompanied by a power of attorney appointing him.
    - ☐ the power of attorney accompanying the international application was not signed by all the applicants.
  - e. ☐ other (*specify*):

\* All applicants must sign, including inventors if they are also applicants (e.g. where the United States of America is designated).

2. As to indications concerning the **applicant**, the request (Rules 4.4 and 4.5):
  - a. ☐ does not properly indicate the applicant's name (*specify*):

- b. ☐ does not indicate the applicant's address.
  - c. ☐ does not properly indicate the applicant's address (*specify*):

- d. ☐ does not indicate the applicant's nationality.
  - e. ☐ does not indicate the applicant's residence.
  - f. ☐ other (*specify*):

3. As to the **language** of certain elements of the international application, other than the description and claims ( Rules 12.1(c) and 26.3ter(a) and (c)):

- a. ☐ the **request** is not in a language which is both a language accepted by this receiving Office and a language of publication, which is (are):

- b. ☐ the **text matter of the drawings** is not in the language in which the international application is to be published, which is:

- c. ☐ the **abstract** is not in the language in which the international application is to be published, which is:

The **title** of the invention:

- a. ☐ is not indicated in Box No. I of the request (Rule 4.1(a)).
  - b. ☐ is not indicated at the top of the first sheet of the description (Rule 5.1(a)).
  - c. ☐ as appearing in Box No. I of the request is not identical with the title heading the description (Rule 5.1(a)).

s to the **abstract** (Rule 8):

- ☐ the international application does not contain an abstract.

# PCT

## GENERAL POWER OF ATTORNEY -

(for several international applications filed under the Patent Cooperation Treaty)

(PCT Rule 90.5)

The undersigned person(s):

(Family name followed by given name; for a full legal entity, full official designation. The address must include postal code and name of country.)

The Johns Hopkins University School of Medicine  
2024 East Monument Street  
Suite 2-100  
Baltimore, Maryland 21205  
United States of America

hereby appoint(s) the following person as:

☒ agent

☐ common representative

Name and address

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Dike, Bronstein, Roberts & Cushman, Intellectual Property Practice Group  
EDWARDS & ANGELL, LLP

P.O. Box 9169, Boston, Massachusetts 02209, U.S.A.

David G. Conlin (Reg. No. 27,026) Cara Z. Lowen (Reg. No. 38,227) David A. Tucker (Reg. No. 27,840)

George W. Neuner (Reg. No. 26,964) William J. Daley, Jr. (Reg. No. 35,487) George W. Hartnell, III (Reg. No. 42,639)

Linda M. Buckley (Reg. No. 31,003) Robert L. Buchanan (Reg. No. 40,927) Peter F. Corless (Reg. No. 33,860)

Christine C. O'Day (Reg. No. 38,256) Steven M. Jensen (Reg. No. 42,693) Stuart L. Gitler (Reg. No. 31,256)

Peter J. Manus (Reg. No. 26,766) Lisa Hazzard Swiszczy (Reg. No. 44,368) Kathryn A. Piffat (Reg. No. 34,901)

to represent the undersigned before

☒ all the competent International Authorities

☐ the International Searching Authority only

☐ the International Preliminary Examining Authority only

in connection with any and all international applications filed by the undersigned with the following Office

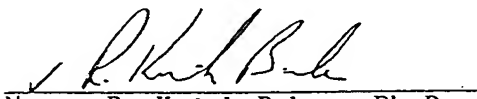
United States Receiving Office

as receiving Office

and to make or receive payments on behalf of the undersigned.

Signature(s) (where there are several persons, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading this power):

for THE JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE:



Name: R. Keith Baker, Ph.D.

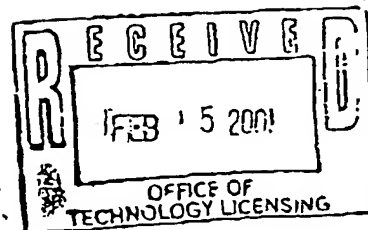
Title: Acting Director,  
Office of Technology Licensing

Date: May 08, 2001



# JOHNS HOPKINS M E D I C I N E

Edward O. Miller, M.D.  
The Frances Warr Baker, M.D. and Lenox O. Baker, Jr., M.D.  
Dean of the Medical Faculty  
Chief Executive Officer



## MEMORANDUM

**TO:** Department Chairmen, Principal Investigators and Department Administrators

**FROM:** Edward D. Miller, M.D.  
Dean of the Medical Faculty  
CEO, Johns Hopkins Medicine

**DATE:** February 9, 2001

**RE:** Institutional Official Signing Authority for Grants, Contracts and Other Research Related Documents (*Effective 02/09/01*)

Listed below are the primary institutional officials who are authorized to sign sponsored research and technology transfer documents on behalf of The Johns Hopkins University School of Medicine:

<u>Chi V. Dang, M.D., Ph.D.</u> Vice Dean for Research	<u>Michael B. Arney</u> Assistant Dean for Research Administration	<u>R. Keith Baker, Ph.D.</u> Acting Director, Office of Technology Licensing	<u>William Tew Ph.D.</u> Executive Director of Licensing & Business Development
---	--	--	--

<u>Julie Gottlieb</u> Special Assistant for Research Affairs	<u>Barbara L. Starklauf</u> Assistant Dean and Administrator, Human Subjects Committees	<u>Sponsored Research Administrators (SRA)<sup>1</sup></u> Stewart P. Craig, Sponsored Research Administrator Joanne Frantz, Sponsored Research Administrator Michelle P. Linehan, Sponsored Research Administrator Dennis Paffrath, Sponsored Research Administrator Linda B. Queen, Asst. Director, Research Administration
--	--	--

Please prepare the appropriate signature block on documents that need to be signed. If another institutional officer must sign due to unavailability of the primary official, the signature provided will be "for" the individual listed.

TYPE OF DOCUMENT	FORWARD TO:	SIGNATURE BY:
Competing Grant Applications to Govt./Non-Profit Sponsors	ORA	Sponsored Research Administrator
Non-competing Grant Applications to Govt./Non-Profit Sponsors	ORA	Sponsored Research Administrator/or Department Administrator where authorized

<sup>1</sup> See department delegation Sponsored Projects Handbook, Appendix A, ([http://infonet.jhu.edu/admin/spons\\_project/handbook/](http://infonet.jhu.edu/admin/spons_project/handbook/)).

TYPE OF DOCUMENT	FORWARD TO:	SIGNATURE BY:
Non-Disclosure Agreements related to Sponsored Research	ORA	M.Amey
Contracts <sup>2</sup> (proposals and awards, all sponsors)	ORA	M.Amey
Contracts that include a license	ORA/OTL	C. Dang or W. Tew
Master Agreements	ORA	C.Dang
Prior Approval Requests and Administrative Updates for all grants (e.g., revised other support pages and letters requesting administrative action)	ORA	Sponsored Research Administrator
Indemnification Agreements	ORA	M.Amey
Awarded Contract Admin. Actions (not increased workscope or \$)	ORA	Sponsored Research Administrator
Final Invention Statements	ORA	Sponsored Research Administrator
Relinquishment Statements	ORA	Sponsored Research Administrator
Certificate of Animal Care and Use Approval	ORA	Sponsored Research Administrator
Certification of Human Subjects Research Approval Status	JCCI	B.Starklauf, or Sponsored Research Administrator
Consulting Agreements	CCOI	J. Gottlieb (when JHU signature required)
License and Option Agreements	OTL	W. Tew
Material Transfer Agreements	OTL	K. Baker or W. Tew
Non-Disclosure Agreements related to Licensing and Consulting	OTL	K. Baker or W. Tew
Patent Related Documents (Power of Attorney)	OTL	K.Baker
Confirmatory License to the Government	OTL	K.Baker
Stock Related Agreements (Stock Escrow, Stock Purchase etc.)	OTL	W. Tew

ORA Office of Research Administration  
 JCCI Joint Committee on Conflict of Interest  
 CCOI Committee on Conflict of Interest  
 OTL Office of Technology Licensing

SOM Admin. Bldg., Room 129  
 Turner 36  
 111 Market Place, Suite 1030  
 111 Market Place, Suite 906

5-3061  
 5-3008  
 410-223-1608  
 410-347-3222

<sup>2</sup>Note: All proposals to commercial sponsors are considered contracts.

The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are with the one chosen by the applicant. full name or two-letter code of that Authority may indicated by the applicant on the line

IPEA/ US

# PCT

## CHAPTER II

### DEMAND

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty and hereby elects all eligible States (except where otherwise indicated).

For International Preliminary Examining Authority use only	
Identification of IPEA	Date of receipt of DEMAND
<b>Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION</b>	
Applicant's or agent's file reference 56792-PCT (71699)	
International application No. PCT/US03/00531	International filing date (day/month/year) 07 January 2003 ( 07/01/03 )
(Earliest) Priority date (day/month/year) 07 January 2002 ( 07/01/02 )	
Title of invention BIOMARKERS FOR DETECTING OVARIAN CANCER	
<b>Box No. II APPLICANT(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) JOHNS HOPKINS UNIVERSITY 720 Rutland Avenue Baltimore, Maryland 21205 US	Telephone No.
	Facsimile No.
	Teleprinter No.
	Applicant's registration No. with the Office
State (that is, country) of nationality: US	State (that is, country) of residence: US
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) CHAN, Daniel W. 12925 Wexford Park Clarksville, Maryland 21029-1401 US	
State (that is, country) of nationality: US	State (that is, country) of residence: US
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) ZHENG, Zhen 14104 Big Branch Drive Dayton, Maryland 21036 US	
State (that is, country) of nationality: CN	State (that is, country) of residence: CN
<input checked="" type="checkbox"/> Further applicants are indicated on a continuation sheet.	



**Continuation of Box No. II APPLICANT(S)**

*If none of the following sub-boxes is used, this sheet should not be included in the demand.*

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

RAI, Alex Jaideep  
42 Benjamin Place  
Staten Island, New York 10303  
US

State *(that is, country)* of nationality:

US

State *(that is, country)* of residence:

US

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:

State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:

State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:

State *(that is, country)* of residence:

☐

Further applicants are indicated on another continuation sheet.

**Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The following person is ☒ agent ☐ common representative  
 and ☒ has been appointed earlier and represents the applicant(s) also for international preliminary examination.  
☐ is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.  
☐ is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

Name and address: *(Family name followed by given name; for a legal entity, full official  
The address must include postal code and name of country.)*

CORLESS, Peter F.  
 EDWARDS & ANGELL, LLP  
 P.O. Box 9169  
 Boston, Massachusetts 02209  
 US

Telephone No.  
 (617) 439-4444

Facsimile No.  
 (617) 439-4170

Teleprinter No.

Agent's registration No. with the Office  
 33,860

☐ **Address for correspondence:** Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

**Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION****Statement concerning amendments:\***

1. The applicant wishes the international preliminary examination to start on the basis of:

☒ the international application as originally filed

the description ☒ as originally filed  
☐ as amended under Article 34

the claims ☒ as originally filed  
☐ as amended under Article 19 (together with any accompanying statement)  
☐ as amended under Article 34

the drawings ☒ as originally filed  
☐ as amended under Article 34

2. ☐ The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.

3. ☐ The applicant wishes the start of the international preliminary examination to be postponed until the expiration of 20 months from the priority date unless the International Preliminary Examining Authority receives a copy of any amendments made under Article 19 or a notice from the applicant that he does not wish to make such amendments (Rule 69.1(d)). *(This check-box may be marked only where the time limit under Article 19 has not yet expired.)*

\* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

**Language for the purposes of international preliminary examination:** English

- ☒ which is the language in which the international application was filed.  
☐ which is the language of a translation furnished for the purposes of international search.  
☐ which is the language of publication of the international application.  
☐ which is the language of the translation (to be) furnished for the purposes of international preliminary examination.

**Box No. V ELECTION OF STATES**

The applicant hereby elects all eligible States *(that is, all States which have been designated and which are bound by Chapter II of the PCT)*

excluding the following States which the applicant wishes not to elect:

**Box No. VI CHECK LIST**

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

- |  |   |        |
|--|---|--------|
| 1. translation of international application                              | : | sheets |
| 2. amendments under Article 34   | : | sheets |
| 3. copy (or, where required, translation) of amendments under Article 19 | : | sheets |
| 4. copy (or, where required, translation) of statement under Article 19  | : | sheets |
| 5. letter  | : | sheets |
| 6. other ( <i>specify</i> )  | : | sheets |

For International Preliminary Examining Authority use only

received not received

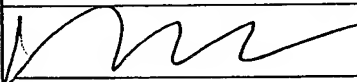
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

The demand is also accompanied by the item(s) marked below:

- |  |   |
|--|---|
| 1. <input checked="" type="checkbox"/> fee calculation sheet                             | 5. <input type="checkbox"/> statement explaining lack of signature                        |
| 2. <input type="checkbox"/> original separate power of attorney                          | 6. <input type="checkbox"/> sequence listings in computer readable form                   |
| 3. <input type="checkbox"/> original general power of attorney                           | 7. <input type="checkbox"/> tables in computer readable form related to sequence listings |
| 4. <input type="checkbox"/> copy of general power of attorney; reference number, if any: | 8. <input type="checkbox"/> other ( <i>specify</i> ):                                     |

**Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).



Peter F. Corless

Agent for Applicants

For International Preliminary Examining Authority use only

- Date of actual receipt of DEMAND:
- Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):
- ☐ The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.
 ☐ The applicant has been informed accordingly.
- ☐ The date of receipt of the demand is WITHIN the period of 19 months from the priority date as extended by virtue of Rule 80.5.
- ☐ Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

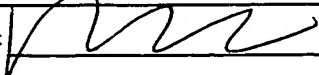
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Demand received from IPEA on:

## PCT

## FEE CALCULATION SHEET

## Annex to the Demand

International application No. <b>PCT/US03/00531</b>	For International Preliminary Examining Authority use only	
Applicant's or agent's file reference <b>56792-PCT (71699)</b>	Date stamp of the IPEA	
Applicant <b>JOHNS HOPKINS UNIVERSITY et al.</b>		
<b>CALCULATION OF PRESCRIBED FEES</b>		
1. Preliminary examination fee .....	<b>490.00</b>	<input type="checkbox"/> P
2. Handling fee <i>(Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.)</i> .....	<b>172.00</b>	<input type="checkbox"/> H
3. Total of prescribed fees ..... Add the amounts entered at P and H and enter total in the TOTAL box .....	<b>662.00</b>	
	<b>TOTAL</b>	
<b>MODE OF PAYMENT</b>		
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input type="checkbox"/> cash	
<input checked="" type="checkbox"/> cheque	<input type="checkbox"/> revenue stamps	
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons	
<input type="checkbox"/> bank draft	<input type="checkbox"/> other (specify):	
<b>AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT</b> <i>(This mode of payment may not be available at all IPEAs)</i>		
<input checked="" type="checkbox"/> Authorization to charge the total fees indicated above.	IPEA/ <u>US</u>	
<input type="checkbox"/> <i>(This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.</i>	Deposit Account No.: <u>04-1105</u>	
	Date: <u>July 25, 2003</u>	
	Name: <u>Peter F. Corless</u>	
	Signature: <u></u>	

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